BÍRCH, STEWART, KOLASCH & BIRCH, LLP

Attorney Docket No. 2921-0148PUS1

PLEASE NOTE: YOU MUST COMPLETE THE **FOLLOWING** 

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## COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

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Insert Title:	METHOD OF PRODUCING A MOVABLE LENS STRUCTURE FOR A LIGHTFORMING UNIT								
	the specification of which is attached hereto. If not attached hereto, the application is identified by the attorney docket number as set forth above and/or the following:								
Fill in Appropriate Information -	The specification was filed o	n <u>04/13/20</u>	05 as United Stat	tes Application Number	10/531,274 ;				
	and amended on04/13/2005 (if applicable) and/or								
For Use Without Specification Attached:	the specification was filed on11/04/2003 as PCT International Application NumberPCT/SE2003/001709;								
	and was amended on (if applicable)  I hereby state that I have reviewed and understand the contents of the above-identified specification, including the								
	claims, as amended by any amendment referred to above.								
	I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.								
	I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representative or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any except as follows.								
	I hereby claim foreign priority benefits under Title 35, United States Code, \$119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:								
	Prior Foreign Application				Priority Claimed				
Insert Priority	0203266-2		weden	November 5, 2002	_ [x] [_]				
Information (if appropriate)	(Number)	(Country)		(Month/Day/Year Filed)	Yes No				
	(Number)	(Country)		(Month/Day/Year Filed)	Yes No				
	(Number)	(Country)		(Month/Day/Year Filed)	Yes No				
	(Number)	(Country)	· <del></del>	(Month/Day/Year Filed)	Yes No				
	I hereby claim the benefit unlisted below.	•	ited States Code, §119(	(e) of any United States prov	isional applications(s)				
Insert Provisional Application(s): (if any)	(Application Number)		(Filing	Date)					
(, )									
	(Application Number) (Filing Date)								
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:								
Insert Requested Information (if appropriate)	Country		Application Number	er Date of Filing (	(Month/Day/Year)				
Insert Prior U.S.	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s), including for continuation-in-part application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.								
Application(s): (if any)	(Application Number)		Filing Date)	(Status - patented, pe	(Status - patented, pending, abandoned)				
	(Application Number)		Filing Date)	(Status - patented, pe	(Status - patented, pending, abandoned)				

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

## CUSTOMER NO. 02292 (BIRCH, STEWART, KOLASCH & BIRCH, LLP)

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PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

ull Name of First or Sole Inventor: sert Name of Inventor Sert Date This Document is Signed	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
Inventor sert Date This Document is Signed	Gert ANDERSSON	X Cut Cll		1 April 27, 2005			
nsert Residence nsert Citizenship →	Residence (City, State & Country)	- Y	CITIZENSI				
	Lindome, Sweden	•	Sweden				
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ull Name of Second Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIZNATURE		DATE*			
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ıll Name of Third Inventor, if any:	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
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ull Name of Fourth Inventor, if any:	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
see above	Anders LARSSON	X (MK)		X May 1, 2005			
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l Name of Fifth	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	-0	DATE*			
nventor, if any: see above	Fredrik NIKOLAJEFF	1x In the Me	<i>}-W</i>	1 May 9, 2005			
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Name of Sixth	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	2	DATE*			
Inventor, if any: see above	Henrik RÖDJEGÅRD	& M. Calladre	no .	ABOIL 29, 2005			
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## ADDED PAGE TO COMBINED DECLARATION AND POWER OF ATTORNEY FOR SIGNING BY ADMINISTRATOR(TRIX), EXECUTOR(TRIX) OR LEGAL REPRESENTATIVE ON BEHALF OF DECEASED OR INCAPACITATED INVENTOR (37 CFR 1.42 AND 1.43)

I,  ANNA-	LENA HARD		
	administrator(trix), executor(trix) lego	l representative or all heirs)	
hereby declare that	I am a citizen of	DEN	
residing at <u>VAS</u>	I am a citizen of SWE TERGARDS VAGEN	425	
		SSTRAND, SWEDEN	
and that I am execu	iting and signing the declara	tion to which this is attached as (ch	ieck one):
the adm	inistrator(trix) of		
executo:	r(trix) of the last will and test	ament of	
🔀 legal rep	resentative (or heirs) of		
Sverker HÅRI			
Full name of (fi	rst, second, etc.) deceased or incapacit	ated inventor	
Sweden			
Country of citiz	enship of deceased or incapacitated in	/entor	
Göteborg, Swe	den		
Residence (City	, State, and Country) of deceased or in	capacitated inventor	<del></del>
Långåsliden 28	3, Göteborg, Sweden, S-142 70		
Mailing Addres	s of deceased or incapacitated inventor	<del></del>	<del></del>
NOTE:	The name of the first, secon also be filled in at the app	d etc. deceased or incapacitated inventor shor ropriate prior space of the declaration addi ed page" or "incapacitated-completed on adde	ng the words
That, upon informa	ation and belief, I aver those	facts which the inventor is required	d to state.
Date:	une 4, 2005 ×	(Signature of administrator(trix), executor(trix)	rix) X
		legal representative (or all heirs))	
NOTE:	establish that they are all the	y the heirs of the inventor if a certificate of th heirs and the estate was not required to appoint a gning add lines for all the heirs to sign. MPEP § 40	n
Page 1 of 1	uummandi. n uit nens atesi	b-mil and miles tot an die Hells to sign. Hif Er 9 40	>.v1(a).